## 2018 - 06 - 11 - 05 - 0021M90M

**FEC** FORM 1

Use

Only

## STATEMENT OF **ORGANIZATION**



Example If typing, type UIU NAME OF (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. MODIRIPIAIRIKI DIEMIOICIRIAITII ICI ICILIUBI ANGELES ADDRESS (number and street) (Check if address is changed) 19,3,0,2,11-11,8,24 STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS (Check if address DONBUNGDEMEYALADON COK is changed) Optional Second E-Mail Address ARRIAIKI7177@IGMAN LIVICOM MOOR PARKDEMOCRATS @ GMAIL. COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address MOORPARKDEMIOCRATISI : COM is changed) 2018 DATE 05 C00638742 FEC IDENTIFICATION NUMBER . OR AMENDED (A) IS THIS STATEMENT NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. E. BING Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

(Revised 06/2012)

5.

FEC	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE	
Candida	ate Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information belo	w.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	omplete the candidate
Name of Candidate		
Candidate Party Affil		State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	e [	
Party C	committee:	
(d) X	( This committee is a Sub (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	connected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) .	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	indraising Representative:	
(9)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidat	
h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
· C	ommittees Participating in Joint Fundraiser	
1.	FEC ID number C	•
2.	FEC ID number C	
3.	FEC ID number C	
4	[	•

٧	Vrite or Type Committee Name	:		``		
	MOORPARK DE	MOCRA	ric club			
6.				int Fundraising Repr	esentative	, or Leadership PAC Sponsor
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7	ENTURA COU	UNITIY!	DEMOCRAT	IICI IPIAIRITI	7	
	Mailing Address	PIOI P	BOX 1151817	1 1 1 1 1 1	111	
	·	CAMA	Rit LLO		111	
		CAMA	RILLO       CITY		CIA STATE	9,3,0,1,1 - 1,5,8,7 ZIP CODE
	Relationship: Connected	l Organizatio	n X Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sponsor
7.	Custodian of Records: Ider books and records.	itify by name	, address (phone number	optional) and positi	on of the p	erson in possession of committee
	Full Name D.O.N.	FILIDI IE	T BING	<u> </u>	111	
	Mailing Address	6,6,7,7	1 WESTWOO	D. 15.T	1_1_1_	
		1 1 1	1 1 1 1 1 1 1 1 1	11111		
		MIDIOIR	LIPIAIRIK I I	11111	CA	1930,211-11330
	Title or Position		CITY		STATE	ZIP CODE
	TREASURER			Telephone nun	nber <u>B</u>	105-12,1,7-13,6,4,1
8.	Treasurer: List the name an any designated agent (e.g.,			of the treasurer of the	committee	; and the name and address of
	Full Name of Treasurer	+10, 16	FIBING II	<u> </u>	1.1.1.	
	Mailing Address	6,6,7,	1. WESTWOO	$D_{ij}S_{i}T_{ij}$	1 1 1	
				<u>.                                     </u>	1 1	
		MODIC	2, P, A, R, K, , , , , ,	1 1 1 1 1	CA	93,0,2,1 - 1330
	Title or Position		CITY		STATE	ZIP CODE
	TREASURER			Telephone nun	nber 8	05-217-3641

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_	FEC Form 1 (Revise	d 02/2009)		Page 4
	Full Name of Designated Agent		1 1 1 1	
	Mailing Address		1111	
			<u>ì   1   1   1   1   1   1   1   1   1   </u>	
	t	CITY	STATE	ZIP CODE
	Title or Position			
		Telephone nu	ımber <u>ı</u>	
•	Banks or Other Depositor safety deposit boxes or mai	ies: List all banks or other depositories in which the commintains funds.	ttee deposits t	unds, holds accounts, rents
	Name of Bank, Depository,	etc:		
	Y'E'N	TUMA: ICOUNTY: CIRIFIDILITI IN	LIN:1:0 N	
	Mailing Address	5,1,0, E, LOS ANGELES A		
	÷		1 1 1 1 1	
		MOIORIPIAIRIKI	CA	9.30,21-2063
		CITY	STATE	ZIP CODE
	Name of Bank, Depository,	etc.		
		<u> </u>	1111	
	Mailing Address		1111	
	,		1 1 1 1 1	
		CITY	STATE	ZIP CODE

207 W LA AVE

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MOCAPARK, CA 0,3021 - 1824 MOORPHE DEMOGRAC CLUB 207 WEST WS ANGELES AVE P.M.B. #259

Federal Election Commission  ENVELOPE REPLACEMENT PAGE FOR INCOM  The FEC added this page to the end of this filing to indice	
Hand Delivered	Date of Receipt
Postmarked  USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	· ·
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	siness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	of Receipt or Postmarked
pof	6-11-18
(3/2015)	DATE PREPARED